

## **How To Keep Smiling – A Guide To Women’s Dental Health**

Oh, the misery! As a father of two little ones, I have recent experience with the discomfort and nausea brought on by pregnancy. I know I personally didn’t experience it, but we fathers-to-be are affected by second hand suffering. Do you know how hard it is to find a corn dog at two in the morning?

Pregnancy does a lot of very strange things to your body. There are many specific issues facing women that, lets face it, men will never understand. The intense changes in hormones, specifically estrogen and progesterone, during different times of a women’s life lead to alterations in the workings of almost all of your body’s systems. Your mouth is no different. These hormonal variations make it critical for women to pay special attention to their oral health, as the teeth and gums can be much more sensitive to irritants like plaque and food debris.

The first surge of hormones for women comes during puberty. During this time in a young woman’s life, the altered levels of estrogen and progesterone make the gums tender and sore. Every foreign object in the mouth causes inflammation and bleeding. Oral ulcers are also a very common occurrence. It is absolutely critical to teach good habits of brushing and flossing to girls at a very young age to minimize the discomfort that arises during this stage of development. Further obstacles to keeping teeth clean, such as wearing braces, can really cause matters to get out of hand.

Another common time to see this hormonally altered tendency for inflammation is during menstruation. In addition to the many other symptoms at this time, women may notice an increase in bleeding gums and soreness right before their period. The gums may be tender to touch and brushing may be painful. Because of this, oral hygiene may not be as thorough as normal, which only increases the problem. Poor hygiene leads to more irritants left in the mouth, which increases inflammation and makes the gums even more sore. This soreness usually goes away on its own following the end of the cycle. This same hormonal spike is artificially created by oral contraceptives, which consequently cause a similar reaction to that of normal menstruation.

Now for the big topic that put this topic on my mind: PREGNANCY. My lovely bride would be more than happy to discuss her personal experiences with pregnancy and the many wonderful and horrible things it entails, but I am going to stick to the effects on the mouth. It all comes back to altered levels of estrogen and progesterone again. In pregnancy, these hormones are extremely altered. When bacterial plaque is left on the teeth, this alteration leads to an exaggerated form of inflammation called “pregnancy gingivitis”. The gums are puffy, sore, and have a tendency to bleed when brushed. This is normally apparent from the second or third month until the eighth month of the pregnancy. As before, hygiene may not be as good during this time due to the soreness, but this is when it really should be a primary focus. In some cases, women may get a benign growth on their gums called a pregnancy tumor. It looks like the gums have grown up over the teeth in the affected area and are red and tender. This tumor is not cancerous and usually requires no treatment. It will go away after the child is born and hormone levels return closer to normal, but in the meantime it can be a real nuisance; painful and unaesthetic.

Normal dental care can most often still be performed during pregnancy. Professional cleanings are crucial during this time to minimize inflammation and pregnancy tumors. Even with the extreme low dose of radiation in a dental x-ray, routine checkup x-rays are many times postponed until after the birth of the child, unless problems are suspected. If necessary, x-rays may be safely taken with the use of a “lead apron” to cover the women’s stomach. Normal dental anesthetics and restorations cause no harm to the unborn child, but treatment is usually preferred during the second trimester. Often, if treatment can be postponed until after the birth, it is, just to minimize stress on the mother. There are certain antibiotics and pain medications that are also perfectly safe during pregnancy should the need arise, but these medicines are usually cleared with the woman’s obstetrician before dispensing. Most NSAID drugs, such as aspirin and ibuprofen, should be avoided. Instead, medications containing acetaminophen (Tylenol) as the chief ingredient are preferred.

During all the times mentioned above, oral hygiene becomes critical. Food and plaque left on the teeth can cause increased inflammation and soreness. Flossing daily to remove trapped irritants and brushing two to three times a day will help to keep gums healthy and pain free. If flossing is too painful, a water pick is useful to blast out trapped food from between

teeth. While it doesn't do as good a job as flossing, it is better than doing nothing. Electric toothbrushes also do a much better job cleaning than manual brushes. Investing in a good electric toothbrush can make a world of difference. Brushes are often obtained much less expensively directly from your dentist than at retail stores. Be sure to ask when you go in for your routine cleaning and checkup. And let me know if you find a late night corn dog vendor, just in case...

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